

PATENT APPLICATION FEE DETERMINATION RECORD
Effective December 8, 2004

10/524188

CLAIMS AS FILED - PART I

| | (Column 1) | (Column 2) |
|---|--|---|
| U.S. NATIONAL STAGE FEES | | |
| BASIC FEE | SMALL ENT. = \$ 150 | LARGE ENT. = \$ 300 |
| EXAMINATION FEE | Satisfies PCT Article 33(1) (4) = \$ 50 / \$ 100 | All other situations = \$ 100 / \$ 200 |
| SEARCH FEE | U.S. is ISA = \$ 50 / \$ 100 ALL other countries = \$ 200 / \$ 400 | All other situations = \$ 250 / \$ 500 |
| FEE FOR EXTRA SPEC. PGS. | minus 100 = | / 50 = |
| TOTAL CHARGEABLE CLAIMS | 15 minus 20 = | |
| INDEPENDENT CLAIMS | 34 minus 3 = | 1 |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> | | |

SMALL ENTITY
TYPE ☐

OR
OTHER THAN
SMALL ENTITY

| RATE | FEE |
|------------|-----|
| BASIC FEE | |
| EXAM FEE | |
| SEARCH FEE | |
| X \$ 125 = | |
| X \$ 25 = | |
| X \$ 100 = | |
| + \$ 180 = | |
| TOTAL | |

OR

| RATE | FE |
|------------|---------|
| BASIC FEE | 300 |
| EXAM FEE | 200 |
| SEARCH FEE | 400 |
| X \$ 250 = | |
| X \$ 50 = | |
| X \$ 200 = | 200 |
| + \$ 360 = | |
| TOTAL | 1100.00 |

* If the difference in column 1 is less than zero, enter "0" in column 2

Re Amended CLAIMS AS AMENDED - PART II

| | (Column 1) | (Column 2) | (Column 3) |
|---|---|---|------------------|
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | 15 | 20 | |
| Independent | 3 | 4 | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

| RATE | ADDI- TIONAL FEE |
|--------------------|------------------------|
| X \$ 25 = | |
| X \$ 100 = | |
| + \$ 180 = | |
| TOTAL ADDI- FEE | |

OR

| RATE | ADDI- TIONAL FEE |
|--------------------|------------------------|
| X \$ 50 = | |
| X \$ 200 = | |
| + \$ 360 = | |
| TOTAL ADDI- FEE | |

| | (Column 1) | (Column 2) | (Column 3) |
|---|---|---|------------------|
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | | | |
| Independent | | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| RATE | ADDI- TIONAL FEE |
|--------------------|------------------------|
| X \$ 25 = | |
| X \$ 100 = | |
| + \$ 180 = | |
| TOTAL ADDI- FEE | |

OR

| RATE | ADDI- TIONAL FEE |
|--------------------|------------------------|
| X \$ 50 = | |
| X \$ 200 = | |
| + \$ 360 = | |
| TOTAL ADDI- FEE | |

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 - ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".
 - *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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